| <b>State of Minnesota</b>          |                        |  | District Cour   |
|------------------------------------|------------------------|--|---|
| County of                          |                        | Judicial District:<br>Court File Numb<br>Assigned Judge:<br>Case Type: | Dissolution without Childre   |
| In Re the Marriage of:             |                        |  |   |
| Name of Petitioner (first, mi      | ddle, last)            |  | Stipulated Findings of Fact,<br>Conclusions of Law, Order for<br>Judgment, Judgment and Decree<br>(Gen. R. Prac. Rule 308.04) |
| Name of Respondent (first,         | niddle, last)          | _  |   |
| A. This proceeding for di court on | ssolution of ma(date)  | arriage came bef   | ore the undersigned judge of district did not appear. Respondent did  |
| did not appear.                    |                        |  | appeared as attorney  |
| for                                |                        | •  |   |
| B. Petitioner is NOT r             | epresented by a        | n attorney OR  |   |
| Petitioner  is represe             | ented by the foll      | lowing attorney:   |   |
| C. Respondent is NOT               | represented by         | an attorney OR   |   |
| Respondent is repre                | esented by the fo      | ollowing attorne   | y:  |
| D. Service of the Summor           | s and Petition f       | for Dissolution o  | f Marriage:   |
| Respondent was personal            | ly served on           |  | ,, OR   |
| Respondent signed an Ad            | mission of Servi       | <i>ice</i> on  | ,, OR   |
| Respondent was served b            | y alternate mear       | ns as ordered by   | the court as follows:   |
| By mailing the S                   | ummons and P           | etition to Respo   | ndent at the address(es) stated in the  |
| Order for Service by               | Alternate Mean         | s on this date:_   |   |
| ☐ By publication of                | of the Summons         | s in   |   |
| newspaper for 3 cons               | secutive weeks,        | once each week   | , on the following 3 dates:   |
| E. Petitioner was served wi        | th an <i>Answer an</i> | nd Counter-Petit   | tion: YES NO  |
| If YES, Petitioner was so          | erved with the A       | Answer and Cour  | nter-Petition on  |

| Month | Dav | Year |
|-------|-----|------|
|       |     |      |

F. Petitioner and Respondent have reached an agreement for marital termination resolving all issues in this case. Petitioner prepared the *Stipulated Findings of Fact, Conclusions of Law, Order for Judgment and Judgment and Decree* and incorporated the stipulated facts and terms of the parties' agreement. Respondent and Petitioner have signed an *Acknowledgement* regarding this agreement, which is included in this document.

## **Findings of Fact**

| Information about Po     | etitioner     |                   |         |          |
|--------------------------|---------------|-------------------|---------|----------|
| Full Name:               |               |                   |         |          |
| Fi                       | rst           | Middle            |         | Last     |
| Address where you liv    | e:            |                   |         |          |
| J                        | Street Addre  |                   |         | Ap       |
| City                     |               | County            | State   | Zip Code |
| Mailing address: S       | lame as abov  | e address OR      |         |          |
| Wannig address.          | anic as above | e address OK      |         |          |
|                          |               |                   |         |          |
|                          |               |                   |         |          |
|                          |               |                   |         |          |
| Street Address           |               |                   | Ap      | t. No.   |
| City                     |               | County            | State   | Zip Code |
| Date of Birth:           |               |                   |         |          |
| Mon                      |               | Year              |         |          |
|                          | J             |                   |         |          |
| List all of Petitioner's | former or oth | er names or write | "None": |          |
|                          |               |                   |         |          |
| First                    | Mic           | ldle              | Last    |          |
|                          |               |                   |         |          |
| First                    | Mic           | ldle              | Last    |          |

Petitioner's social security number is listed on Confidential Form 11.1 and submitted along with the Petition.

### 2. Information about Respondent

| Full Name:       |   |                              |                      |          |
|------------------|---|------------------------------|----------------------|----------|
|                  | First   | Middle                       |                      | Last     |
| Address where    | Respondent lives_                             |                              |                      |          |
|                  |   | Street Address               |                      | Apt. No. |
| City             |   | County                       | State                | Zip Code |
| Mailing address  | s: Same as above                              | ve address OR                |                      |          |
| Street           | Address                                       |                              |                      | Apt. No. |
| City             | Cor   | unty                         | State                | Zip Code |
| Respondent's D   |   | onth Day<br>other names or w | Year Trite "None":   |          |
| First            | Middle  |                              | Last                 |          |
| First            | Middle  |                              | Last                 |          |
| Our Marriage     |   |                              |                      |          |
| Petitioner and F | Respondent were m                             | arried on: (month,           | day, year)           | , in the |
| City of          | <del>,</del>                                  | , County of                  |                      | , State  |
| of               |   | _, Country of                |                      |          |
|                  | rement een living in Minno been living in Mir | _                            |                      |          |
| Kespondent flas  | o occu nymg m wm                              | mesota for the par           | st six (0) iii0iitii | 5 1E5 NO |

**3.** 

4.

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|    | Petitioner and Respondent were married in Minnesota, but neither Petitioner nor            |
|----|--|
|    | Respondent reside in Minnesota, nor reside in a jurisdiction that will allow an action for |
|    | dissolution because of the sex or sexual orientation of the Petitioner and Respondent.     |
|    | ☐ YES ☐ NO   |
|    |  |
| 5. | Armed Forces   |
|    | Is Petitioner an active duty member of the armed forces.   YES NO                          |
|    | If YES, has Petitioner been stationed in Minnesota for the past six (6) months?            |
|    | ☐ YES ☐ NO   |
|    |  |
|    | Is Respondent an active duty member of the armed forces.   YES NO                          |
|    | If YES, has Respondent been stationed in Minnesota for the past (6) months?                |
|    | □YES □NO   |
|    |  |
| ó. | Marriage Cannot be Saved   |
|    | There has been an irretrievable breakdown of the marriage relationship and the marriage    |
|    | between Petitioner and Respondent cannot be saved.   |
|    |  |
| 7. | Physical Living Situation  |
|    | The Petitioner and Respondent live together at this time YES NO                            |
|    | If <b>NO</b> , the date of separation was:   |
|    | Month Day Year   |
|    | If <b>YES</b> , Petitioner and Respondent are living together because:                     |
|    |  |
|    |  |
|    |  |

# 8. Other Proceedings

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|     | A separate court case for marriag  | e dissolution, leg | al separatio            | on, or an        | nulment has  | s already   |
|-----|--|--------------------|-------------------------|------------------|--------------|-------------|
|     | been started by Petitioner or Resp   | ondent in Minnes   | sota or else            | where?           | YES          | □NO         |
|     | If YES, the type of court case is:   |                    |                         |                  | and it was s | started in  |
|     | Co   | ounty in the Stat  | e of                    |                  |              | and the     |
|     | Court file number is   | , and              | the status              | or outcor        | ne of the ca | se is:      |
|     | Open Closed or   |                    |                         |                  |              |             |
|     |  |                    |                         |                  |              |             |
| 9.  | <b>Protection or Harassment Order</b>  | r                  |                         |                  |              |             |
|     | An Order for Protection or a   | Harassment/Res     | training O              | rder is          | in effect r  | egarding    |
|     | Petitioner and Respondent?  YI   | ES NO If Y         | <b>ES:</b> The <i>O</i> | <i>rder</i> prot | ects:        | Petitioner  |
|     | Respondent and the Order was   | s filed in         |                         |                  |              |             |
|     | County in  | State on           |                         |                  | date,        | and the     |
|     | Court file number is   |                    | <u>.</u>                |                  |              |             |
|     |  |                    |                         |                  |              |             |
| 10. | Children   |                    |                         |                  |              |             |
|     | "Minor" children are under age 18, o   | r under age 20 but | still in high           | school.          |              |             |
|     | a. Do Petitioner and Respondent h  | ave minor childre  | en together?            | ? \( \text{YE}   | S NO         |             |
|     | b. Do Petitioner and Respondent  | have any adult of  | dependent o             | children         | who are no   | t able to   |
|     | support themselves because of a p  | hysical or mental  | condition?              | Y]               | ES NO        |             |
|     | c. Has either Petitioner or Respon   | dent given birth d | luring the n            | narriage         | to a child w | ho is not   |
|     | a child of the other spouse?   | YES NO             |                         |                  |              |             |
|     | Te and the last of | 1 ICATEG (         | 1 1                     |                  |              |             |
|     | If you answered NO to c, skip to   |                    |                         |                  | 1.           |             |
|     | i. Fill in the information for all   | children born dui  | ang the ma              | rriage wi        | no are not b | iological   |
|     | children of both spouses.  Full Name of Child  | Date of Birth      | A ~~                    | Which            | Dorty in Die | th Doront?  |
|     | Tun Name of Child  | Date Of Diffil     | Age                     | vv IIICI1        | Party is Bir | ui Faicill! |
|     |  |                    |                         | <u> </u>         |              |             |

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| ii. Is there a Court Ord   | ler nami   | ng someone oth      | ner than the   | spouse as the  | he father of the     |
|--|------------|---------------------|----------------|----------------|----------------------|
| child(ren) listed at i?  | YES [      | NO If YES           | S, fill in:    |                |                      |
| Full Name of Child   | Date       | of Court Order      | County/Sta     | te of Order    | Court Case No.       |
|  |            |                     |                |                |                      |
|  |            |                     |                |                |                      |
|  |            |                     |                |                |                      |
|  |            |                     |                |                |                      |
| iii. Have the spouse and   | biologic   | cal Father signe    | d a Minneso    | ota Recogniti  | on of Parentage      |
| (ROP) for any of the   | children   | n listed in (i) abo | ove? YE        | S NO           |                      |
| If <b>YES</b> , state the full   | name o     | f the child:        |                |                |                      |
| and submit a certific  | ed copy    | of the Recogni      | tion of Parc   | entage, if not | t submitted with     |
| the Petition.  |            |                     |                |                |                      |
| iv. Has a "Husband's No  | on-Pater   | nity Statement"     | for any of the | ne children li | sted at (i) above    |
| been signed? YE  | S \[ \] N  | 1O                  |                |                |                      |
| If <b>YES</b> , state the nan  | ne of the  | child:              |                |                |                      |
| and submit a certifi   | ed copy    | of the "Husba       | and's Non-l    | Paternity Sta  | atement" if not      |
| submitted with the P   | etition.   |                     |                |                |                      |
| For each minor child li<br>Recognition of Parentage<br>Children form.)             |            |                     | -              | -              |                      |
| l. Neither spouse is pregn   | ant 🔲 `    | YES NO (            | If either spo  | use is pregna  | nt use Marriage      |
| Dissolution <u>With</u> Children   | form.)     |                     |                |                |                      |
|  |            |                     |                |                |                      |
| Public Assistance/Medi   | ical Assi  | stance              |                |                |                      |
| Note: If either party is recafter this proceeding is staction to the Support and C | tarted, th | e Petitioner shou   | ıld give notio | ce of this man | rriage dissolution   |
| a. Petitioner receives pu  | blic assi  | stance from the     | State of Mir   | nnesota: 🗌 Y   | YES NO               |
| If YES, the assistance   | e is from  | l                   |                | _County. (Ch   | eck all that apply): |
|  |            |                     |                |                |                      |

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11.

|     |    | ☐MFIP ☐Tribal ′                 | TANF General Assi                              | stance Child Care Assistance        |              |
|-----|----|---------------------------------|--|-------------------------------------|--------------|
|     |    | Minnesota Care                  | Medical Assistance                             | •                                   |              |
|     | b. | Respondent receives             | s public assistance from                       | the State of Minnesota: YES         | □NO          |
|     |    | If YES, the assistan            | ce is from                                     | County. (Check all                  | that apply): |
|     |    | MFIP Tribal                     | TANF General Assi                              | stance Child Care Assistance        |              |
|     |    | Minnesota Care                  | Medical Assistance                             |                                     |              |
| 12. | Su |                                 |  | income supplement program. It is a  | ıvailable to |
|     | a. | Petitioner receives St<br>\$ pe |  | ome: NO YES in the amou             | nt of        |
|     | b. | Respondent receives \$          | * *  | ncome: NO YES in the am             | ount of      |
| 13. | Pe | titioner's Employm              | ient   |                                     |              |
|     | a. | Petitioner is employ            | yed. YES NO                                    |                                     |              |
|     | b. | Petitioner is Self-E            | mployed.  YES                                  | ] NO                                |              |
|     | c. |                                 | of Petitioner's employeress of each employer.) | er. (If Petitioner has more than or | ne job, list |
|     |    | Name of Petitioner's E          | mployer (If Self-Employed                      | l, list name and business address)  |              |
|     |    | Employer's Street Add           | ress   |                                     |              |
|     |    | City                            | State  | Zip Code                            |              |
|     |    | Name of Petitioner's E          | Employer (If Self-Employe                      | d, list name and business address)  |              |
|     |    | Employer's Street Add           | ress   |                                     |              |
|     |    | City                            | State  | Zip Code                            |              |

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#### 14. **Petitioner's Gross Income**

**15.** 

The Income questions ask for monthly income. If you are paid weekly, multiply your weekly income by 4.33 to get monthly income. If you are paid every two weeks, multiply by 2.17 to get monthly income. If you are paid twice a month, multiply by 2.

|    | Source of Income          | Amount per month (or ze                                   | ero) before taxes and    | deductions     |
|----|---------------------------|---|--------------------------|----------------|
|    | Self Employment In        | come  | \$                       | _per month     |
|    |                           | me means gross receipts minus onses. Use monthly average. | cost of goods sold minus | s ordinary and |
|    | Income from all job       | S   | \$                       | _ per month    |
|    | Commissions from          | all jobs  | \$                       | _ per month    |
|    | Unemployment bene         | efits   | \$                       | _ per month    |
|    | Social Security Reti      | rement, Survivors or                                      |                          |                |
|    | Disability Income         |   | \$                       | _ per month    |
|    | Investments or Rent       | al Income   | \$                       | _ per month    |
|    | Annuity payments          |   | \$                       | _ per month    |
|    | Pension or Disabilit      | y from work or military                                   | \$                       | _ per month    |
|    | Worker's Compensa         | ation   | \$                       | _ per month    |
|    | Court-ordered spous       | sal maintenance you receive                               | \$                       | _ per month    |
|    | OtherIdentify So          | ource   | \$                       | _ per month    |
|    | Total <b>gross</b> income |   | \$                       | _ per month    |
|    | Petitioner receive child  | support payments.   YES                                   | □NO                      |                |
|    | If YES, Petition          | ner receives child  | support paymen           | nts from       |
|    |                           | (name(s) of pay   | yor(s)) in the total     | amount of      |
|    | \$p                       | er month.   |                          |                |
| Re | spondent's Employmen      | nt  |                          |                |
| a. | Respondent is employed    | d. YES NO   |                          |                |
| b. | Respondent is Self-Emp    | oloyed. YES NO  |                          |                |

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| Name of Respondent's Employer (If Self-Employed list name  | e and busines   | s address)  |
|--|---|---|
| Employer's Street Address  |   |   |
| City State   |   | Zip Code  |
| Name of Respondent's Employer (If Self-Employed list name  | e and business  | address)  |
| Employer's Street Address  |   |   |
| City State   |   | Zip Code  |
| e Income questions ask for <u>monthly</u> income. If Respondence by 4.33 to get monthly income. If Respondent is paget monthly income. If Respondent is paid twice a month,  Source of Inc.  Amount per month (or 7)   | id every two<br>multiply by   | weeks, multiply by 2.   |
| ome by 4.33 to get monthly income. If Respondent is paget monthly income. If Respondent is paid twice a month,  Source of Inc  Amount per month (or z  | id every two<br>multiply by<br>ero) before  | weeks, multiply by 2<br>2.<br>taxes and deduction   |
| ome by 4.33 to get monthly income. If Respondent is paget monthly income. If Respondent is paid twice a month,   | id every two<br>multiply by<br>ero) before<br>\$  | weeks, multiply by 2  taxes and deducti  per mont   |
| ome by 4.33 to get monthly income. If Respondent is paget monthly income. If Respondent is paid twice a month,  Source of Inc  Amount per month (or z  Self Employment Income  Self Employment income means gross receipts minumecessary   | id every two<br>multiply by<br>ero) before<br>\$  | weeks, multiply by 2  taxes and deducti  per mont   |
| some by 4.33 to get monthly income. If Respondent is paget monthly income. If Respondent is paid twice a month,  Source of Inc  Self Employment Income  Self Employment income means gross receipts minut  | id every two<br>multiply by<br>ero) before<br>\$  | weeks, multiply by 2  taxes and deducti  per mont ds sold minus ordinary  |
| set monthly income. If Respondent is part monthly income. If Respondent is part twice a month, source of Inc  Self Employment Income  Self Employment income means gross receipts minus necessary business expenses. Use monthly average.  | id every two multiply by ero) before \$s cost of goo  | e taxes and deducti per mont ds sold minus ordinary per mon   |
| set monthly income. If Respondent is parted monthly income. If Respondent is paid twice a month, source of Inc  Self Employment Income  Self Employment income means gross receipts minus necessary  business expenses. Use monthly average.  Income from all jobs   | id every two multiply by ero) before \$s cost of goo \$\$   | e taxes and deducti per mont ds sold minus ordinary per mont per mont per mont  |
| set monthly income. If Respondent is partiet monthly income. If Respondent is paid twice a month, source of Inc  Self Employment Income  Self Employment income means gross receipts minus necessary  business expenses. Use monthly average.  Income from all jobs  Commissions from all jobs   | id every two multiply by ero) before \$s cost of goo \$\$ \$\$                                    | e taxes and deducti  per mont ds sold minus ordinary  per mon  per mon  per mon  per mon  |
| set monthly income. If Respondent is parted monthly income. If Respondent is paid twice a month, source of Inc  Self Employment Income  Self Employment income means gross receipts minum necessary  business expenses. Use monthly average.  Income from all jobs  Commissions from all jobs  Unemployment benefits   | id every two multiply by ero) before \$s cost of goo \$\$   | e taxes and deducti   |
| set monthly income. If Respondent is parted monthly income. If Respondent is paid twice a month, source of Inc  Self Employment Income  Self Employment income means gross receipts minumecessary  business expenses. Use monthly average.  Income from all jobs  Commissions from all jobs  Unemployment benefits  Social Security (SSDI or RSDI)   | id every two multiply by ero) before \$s cost of goo \$\$   | e taxes and deducti   |
| set monthly income. If Respondent is parted monthly income. If Respondent is paid twice a month, source of Inc  Self Employment Income  Self Employment income means gross receipts minumecessary  business expenses. Use monthly average.  Income from all jobs  Commissions from all jobs  Unemployment benefits  Social Security (SSDI or RSDI)  Investments or Rental Income   | id every two multiply by ero) before \$s cost of goo \$\$   | e taxes and deducti   |
| set monthly income. If Respondent is parted monthly income. If Respondent is paid twice a month, source of Inc  Self Employment Income  Self Employment income means gross receipts minumecessary  business expenses. Use monthly average.  Income from all jobs  Commissions from all jobs  Unemployment benefits  Social Security (SSDI or RSDI)  Investments or Rental Income  Annuity payments   | id every two multiply by ero) before \$s cost of goo \$\$ \$\$ \$\$ \$\$ \$\$ \$\$ \$\$ \$\$      | e taxes and deducti   |
| set monthly income. If Respondent is parted monthly income. If Respondent is paid twice a monthly set monthly income. If Respondent is paid twice a monthly set monthly income. If Respondent is paid twice a monthly set monthly set income.  Self Employment Income  Self Employment income means gross receipts minus necessary  business expenses. Use monthly average.  Income from all jobs  Commissions from all jobs  Unemployment benefits  Social Security (SSDI or RSDI)  Investments or Rental Income  Annuity payments  Pension or Disability from work or military | id every two multiply by ero) before \$s cost of goo \$\$ \$\$ \$\$ \$\$ \$\$ \$\$ \$\$ \$\$ \$\$ | e taxes and deduction  per mont  per mont |

**16.** 

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|     | Total <b>gross</b> income \$ per month  |
|-----|---|
|     | Does Respondent receive child support payments?   YES  NO                         |
|     | If YES, Respondent receives child support payments from                           |
|     | (name(s) of payor(s)) in the total amount of                                      |
|     | \$per month.  |
| 17. | Health Care Coverage  |
|     | a. Petitioner has insurance coverage through his/her employment.                  |
|     | Medical: YES NO Dental: YES NO  |
|     | If YES, this medical insurance covers:   Petitioner Respondent and this dental    |
|     | insurance covers: Petitioner Respondent   |
|     | b. Respondent has insurance coverage <b>through his/her employment.</b>           |
|     | Medical: YES NO Dental: YES NO  |
|     | If YES, this medical insurance covers:   Petitioner Respondent and this dental    |
|     | insurance covers: Petitioner Respondent   |
|     | c. Petitioner receives Medical Assistance or Minnesota Care through the State of  |
|     | Minnesota.  |
|     | d. Respondent receives Medical Assistance or Minnesota Care through the State of  |
|     | Minnesota.  |
|     |   |
|     |   |
| 18. | Spousal Maintenance   |
|     | Spousal Maintenance is money paid by one spouse to the other for living expenses. |
|     | Check only one box:   |

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| Petitioner and Respondent do not need spousal maintenance at this time, or in the   |  |  |  |  |  |  |
|---|--|--|--|--|--|--|
| future. Both parties agree that each party is fully capable of self-support and is not  |  |  |  |  |  |  |
| dependent upon the other for additional support in the form of spousal maintenance.   |  |  |  |  |  |  |
| Each party has made a full and fair disclosure of all income and assets and liabilities that each is responsible for, and agrees that this waiver is reasonable. The waiver is fair and |  |  |  |  |  |  |
|   |  |  |  |  |  |  |
| after full financial disclosure to each other.  |  |  |  |  |  |  |
| arter run rinancial discressure to each other.  |  |  |  |  |  |  |
| Petitioner or Respondent may need spousal maintenance in the future. The court  |  |  |  |  |  |  |
| should reserve maintenance to allow either party to ask for spousal maintenance in the  |  |  |  |  |  |  |
| future because:   |  |  |  |  |  |  |
| (explain why you want to do this)   |  |  |  |  |  |  |
|   |  |  |  |  |  |  |
|   |  |  |  |  |  |  |
|   |  |  |  |  |  |  |
|   |  |  |  |  |  |  |
| Petitioner needs spousal maintenance from Respondent now. Petitioner is   |  |  |  |  |  |  |
| years of age, Petitioner and Respondent have been married for   |  |  |  |  |  |  |
| years. Petitioner has the following education:  |  |  |  |  |  |  |
| Petitioner's gross monthly income totals  |  |  |  |  |  |  |
|   |  |  |  |  |  |  |
| \$ Petitioner's monthly expenses total \$ and   |  |  |  |  |  |  |
| Petitioner is not able to maintain the standard of living established during the marriage   |  |  |  |  |  |  |
| because:  |  |  |  |  |  |  |
| because.  |  |  |  |  |  |  |
| Respondent has the ability to pay Petitioner \$per month for spousal  |  |  |  |  |  |  |
| maintenance.  |  |  |  |  |  |  |
| Respondent needs spousal maintenance from Petitioner now. Respondent is   |  |  |  |  |  |  |
| years of age, Petitioner and Respondent have been married for   |  |  |  |  |  |  |
| years. Respondent has the following education:  |  |  |  |  |  |  |
| Respondent's gross monthly income totals  |  |  |  |  |  |  |

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| \$           | Respondent's monthly expenses total \$                                   | , and         |
|--------------|--|---------------|
| Responder    | nt is not able to maintain the standard of living established during the | ne marriage   |
| because: _   |  |               |
| Petitioner   | has the ability to pay Respondent \$per month                            | for spousal   |
| maintenan    | ce.  |               |
| Vehicles     |  |               |
| Vehicles an  | re cars, trucks, boats, motorcycles, snowmobiles, personal watercraft    | , all terrain |
| vehicles etc | c. owned by Petitioner and Respondent together or separately, includ     | ing vehicles  |
| purchased a  | after separation:  |               |
| Petitioner   | owns a vehicle.  YES NO  |               |
| D 1          | nt owns a vehicle.  YES NO   |               |

| Type of                         | Year/Make/ | Name(s) on | Value | <b>Balance Owed</b> | Monthly |
|---------------------------------|------------|------------|-------|---------------------|---------|
| Vehicle (car, boat, truck etc.) | Model      | Title      |       |                     | Payment |
|                                 |            |            | \$    | \$                  | \$      |
|                                 |            |            | \$    | \$                  | \$      |
|                                 |            |            | \$    | \$                  | \$      |
|                                 |            |            | \$    | \$                  | \$      |

#### **20.** Marital Property

Marital property means almost anything that you or your spouse now own that was received or bought during the marriage, even during the times you were separated. Marital Property includes household goods, furniture, jewelry, boats, real estate and other things. Marital property does *not* include a gift or inheritance received by one spouse *alone*.

| The   | marital  | property | been | divided | between | Petitioner | and | Respondent | to | their |
|-------|----------|----------|------|---------|---------|------------|-----|------------|----|-------|
| satis | faction. |          |      |         |         |            |     |            |    |       |

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| YES |  | NO |
|-----|--|----|
|-----|--|----|

| If I                               | NO, Respondent requests the following marital property:  |
|------------------------------------|--|
| No<br>ma<br>inh<br>or<br>of<br>set | on-Marital Property on-marital property means: (1) anything that you or your spouse owned before the arriage; (2) anything that you or your spouse received as a gift, bequest, devise, of the arriage in exchange for your spouse alone; (3) anything that you or your spouse got in trade in exchange for your non-marital property; (4) anything that is an increase in the value non-marital property; (5) anything you or your spouse received after the valuation date by the court; or (6) anything defined as non-marital property by a valid antenuption tract. |
| a.                                 | Petitioner has non-marital property.   |
|                                    | If YES, list Petitioner's non-marital property:  |
|                                    |  |
| b.                                 | Respondent has non-marital property.  YES NO   |
|                                    | If YES, list Respondent's non-marital property:  |
|                                    |  |
| Ca                                 | sh & Accounts – Not including Pension and Employer-Funded Retiremen  |
| Ac                                 | counts   |
| Pet                                | titioner has money in banks, savings, cash or investments.  YES NO   |
| Re                                 | spondent has money in banks, savings, cash or investments.   YES NO  |
| If `                               | YES,   |
| a.                                 | List all accounts owned by you alone, your spouse alone, or owned by both of you   |
|                                    |  |

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savings, money market accounts, certificates of deposit, stocks, bonds, stock options, mutual funds, savings bonds, and Treasury Bills, etc. Use Confidential Information Form 11.1 (CON111) to list Financial Institution name, account holder name(s), and account numbers.

Do not include Pension or Employer-Funded Retirement Accounts, which are listed at #26.

| Financial   | Type of Account | Amount | Belongs to:       |
|-------------|-----------------|--------|-------------------|
| Institution |                 |        | (name on account) |
|             |                 | \$     |                   |
|             |                 | \$     |                   |
|             |                 | \$     |                   |
|             |                 | \$     |                   |
|             |                 | \$     |                   |
|             |                 | \$     |                   |

#### 24. Manufactured Home

23.

Petitioner owns a manufactured home. YES NO

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| Respondent owns a manufactured home.   YES NO  |  |  |  |  |  |  |  |
|--|--|--|--|--|--|--|--|
| If either Petitioner or Respondent own a manufactured home, together or  |  |  |  |  |  |  |  |
| separately, complete the following information:  |  |  |  |  |  |  |  |
| a. Address of the manufactured home:   |  |  |  |  |  |  |  |
| in the city of, state of   |  |  |  |  |  |  |  |
| b. What type of home is it? (single, double-wide etc.)   |  |  |  |  |  |  |  |
| c. Whose name(s) is on the title?  |  |  |  |  |  |  |  |
| d. When was the home purchased?  |  |  |  |  |  |  |  |
| e. What was the purchase price? \$   |  |  |  |  |  |  |  |
| f. What is the current values of the home? \$  |  |  |  |  |  |  |  |
| g. How did you arrive at that amount as the current value?   |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
| h. How much money is still owed on the home? \$  |  |  |  |  |  |  |  |
| i. If money is owed on the home, who is the money owed to?   |  |  |  |  |  |  |  |
| j. Do you own the land the home sits on, or do you rent a lot?   Rent Own  |  |  |  |  |  |  |  |
| Note: If you own the lot, you must list the land at Paragraph 25.  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
| Real Property - Land, Buildings, Contracts for Deed  |  |  |  |  |  |  |  |
| All real property now owned by Petitioner or Respondent together or separately must be listed.  Include real property acquired before the marriage, during the marriage, and after separation.  a. Petitioner and Respondent jointly own real property.   YES NO |  |  |  |  |  |  |  |
| b. Petitioner owns real property solely in his/her own name or with someone other than   |  |  |  |  |  |  |  |
| Respondent.  |  |  |  |  |  |  |  |
| c. Respondent owns real property solely in his/her own name or with someone other  |  |  |  |  |  |  |  |
| than Petitioner.   |  |  |  |  |  |  |  |

25.

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|     | d. How many properties are owned by you and your spouse in total?   None   One  |
|-----|---|
|     | ☐ Two ☐ Three ☐   |
|     | If you or your spouse own real property, separately or together, complete the   |
|     | following information about the property. If there is more than one piece of real   |
|     | property, photocopy and complete a Real Property Information page for each piece of   |
|     | property. Staple the additional sheets to the Stipulated Findings of Fact and label each  |
|     | sheet "Attachment to Stipulated Findings of Fact of(your  |
|     | names)"   |
| Res | al Property Information   |
| 1.  | Real Estate belongs to: (List full names of all owners)   |
| 2.  | Legal Description is: (The full legal description <b>must</b> be included. Copy the legal description from the deed. Do not use the property tax statement legal description. If the legal description is long, you may use an attachment. Type or print neatly.) |
| 3.  | Street Address of the real property is:   |
|     |   |
|     | City State Zip Code   |
|     | The property is in County.  |
| 4.  | Purchase date(month, day, year) and purchase price:\$   |
| 5.  | Mortgages or loans: (List all mortgages and loans on the property)  There are no mortgages or loans on this property.   |
|     | 1 <sup>st</sup> Mortgage: Amount currently owed \$and name of lender  |
|     |   |

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|     | 2 <sup>nd</sup> Mor        | tgage: Amount currently owed \$and name of lender                                   |  |  |  |  |  |
|-----|----------------------------|---|--|--|--|--|--|
|     | Other m                    | ortgages or loans:  |  |  |  |  |  |
| 5.  | Current                    | Market Value of this property:\$  |  |  |  |  |  |
|     | How did                    | d you arrive at this value?   |  |  |  |  |  |
| 7.  | This pro                   | operty is the homestead:YesNo   |  |  |  |  |  |
| 26. | Retire                     | ement Plans   |  |  |  |  |  |
|     | a. Pe                      | titioner has a retirement account. (IRA, 401(k), 403(b) or other)                   |  |  |  |  |  |
|     |                            | ES NO If <b>YES:</b> The name of the Financial Institution, account holder          |  |  |  |  |  |
|     | name(                      | s), and account number is listed on Confidential Information Form 11.1 (CON111).    |  |  |  |  |  |
|     | The current balance is: \$ |   |  |  |  |  |  |
|     |                            | titioner, or Petitioner's past or present employer, union, or other group, paid     |  |  |  |  |  |
|     | money                      | into a pension, profit sharing, or other retirement plan for Petitioner.            |  |  |  |  |  |
|     | YE                         | ES NO If YES:   |  |  |  |  |  |
|     | i.                         | The name of the plan is:  |  |  |  |  |  |
|     | ii.                        | The employer, union or group providing the plan is:                                 |  |  |  |  |  |
|     | iii.                       | The date Petitioner began working at the job or joined the union or group plan is:_ |  |  |  |  |  |
|     | iv.                        | The type of plan is: (e.g. defined benefit, defined contribution)                   |  |  |  |  |  |
|     | v.                         | The present value of the pension or plan is:  |  |  |  |  |  |

c. **Respondent** has a retirement account. (IRA, 401(k), 403(b) or other)

|     |  |                  |                       | the Debt Inc<br>Name        | urrea?<br>Date |                 |                    |
|-----|--|------------------|-----------------------|-----------------------------|----------------|-----------------|--------------------|
|     |  | y is owed<br>to: | Money was used for:   | Whose Name<br>Account and V | Vhen was       | Balance<br>Owed | Monthly<br>Payment |
|     | If YES, list debts in your name, your spouse's name and in both names jointly. Include unpaid debts from before the marriage date, during the marriage, and after separation. Fill in all information completely and attach another sheet of paper if necessary. |                  |                       |                             |                |                 |                    |
|     | Respondent has debts.  |                  |                       |                             |                |                 |                    |
|     | Petitio  | oner has deb     | ots. YES              | NO                          |                |                 |                    |
| 27. | Debts  |                  |                       |                             |                |                 |                    |
|     | v.   | The presen       | nt value of the pensi | on or plan is:              |                |                 |                    |
|     | iv. The type of plan is: (e.g. defined benefit, defined contribution)  |                  |                       |                             |                |                 |                    |
|     |  | is:              |                       |                             |                |                 |                    |
|     | iii.   | The date I       | Respondent began v    | vorking at the job          | or joined t    | he union or g   | group plan         |
|     | ii.  | The emplo        | oyer, union or group  | providing the pla           | n is:          |                 |                    |
|     | i.   | The name         | of the plan is:       |                             |                |                 |                    |
|     | Plan:  |                  |                       |                             |                |                 |                    |
|     | ☐ YI   | ES NO            | If YES, and it        | is a <b>Pension, Pro</b>    | ofit-Sharing   | g, or other R   | etirement          |
|     | money  | into a pens      | sion, profit sharing, | or other retiremen          | nt plan for R  | despondent.     |                    |
|     | d. Respondent, or Respondent's past or present employer, union, or other group, pa   |                  |                       |                             |                |                 |                    |
|     | current balance is:  |                  |                       |                             |                |                 |                    |
|     | and ac   | ecount num       | ber is listed on Co   | nfidential Inform           | ation Form     | 11.1 (CON1      | 11). The           |
|     | ☐ YES ☐ NO If YES: The name of the Financial Institution, account holder name(s),  |                  |                       |                             |                |                 |                    |

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\$

\$

\$

|   |                   | \$ | \$ |
|---|-------------------|----|----|
|   |                   | \$ | \$ |
|   |                   | ¢. | φ  |
|   |                   | \$ | \$ |
|   |                   | \$ | \$ |
|   |                   | \$ | \$ |
|   |                   | \$ | \$ |
|   |                   | ¢. | ¢. |
|   |                   | \$ | \$ |
| _ |                   | \$ | \$ |
|   | <b>Total Debt</b> | \$ | \$ |

28.

| Name Change                 |                                      |                                |
|-----------------------------|--------------------------------------|--------------------------------|
| a. Neither person war       | nts to change his/her name.          |                                |
| ☐ b. ☐ Petitioner ☐         | Respondent wants to change his       | s/her name to: (full name, not |
| initials)                   |                                      |                                |
|                             |                                      |                                |
| first                       | middle                               | last                           |
| This name change request    | is made with no intent to defraud of | or mislead anyone:             |
| ☐ True ☐ False.             |                                      |                                |
| The person requesting the   | name change has been convicted of    | of a felony:                   |
| ☐ YES ☐ NO                  |                                      |                                |
| If YES:                     |                                      |                                |
| i. Notice of this reque     | est for name change has been give    | en to the proper authority as  |
| required by Minn. Stat. §   | 259.13. (IMPORTANT NOTICE:           | : If you are a convicted felon |
| and you request a name      | change without following the red     | quirements of Minn. Stat. §    |
| 259.13, using the new last  | name after your divorce is a gross   | misdemeanor.)                  |
| ii. An Affidavit of Serv    | vice of the Notice marked Exhibit "  | A" has been submitted along    |
| with this Stipulated Findir | ngs of Fact, Conclusions of Law, O   | order for Judgment, Judgment   |
| and Decree.                 |                                      |                                |

|                        | UPON THE ABOVE INFORMATION, the parties agree that the Court shall e following:                |
|------------------------|--|
|                        | CONCLUSIONS OF LAW   |
|                        | bonds of matrimony between Petitioner and Respondent are dissolved, so they e and not married. |
| SHIGH                  | and not married.   |
| Healtl                 | h Care Coverage for the Parties  |
| <ul><li>□ a.</li></ul> | Each party to provide for his or her own   |
| <ul><li>□ b.</li></ul> | (full name) shall provide  |
|                        | dental insurance for   |
| □ c.                   | (full name)  |
|                        | to continue the dependent coverage available under the other party's insura                    |
|                        | plan, pursuant to federal and state statutes.  |
| ☐ d.                   | Reserving the issue of medical and dental insurance for the parties.                           |
| Spous                  | al Maintenance   |
|                        | Neither party is awarded spousal maintenance. Petitioner and Respondent h                      |
|                        | d any claims to spousal maintenance for the past, present, or future and expre                 |
|                        | all rights to modify their waivers of maintenance. This court is divested                      |
|                        | ction to award or modify maintenance in the future pursuant to Karon v. Kan                    |
| 425 NT                 | .W.2d 501 (Minn. 1989).  |

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| the parties' mutual waivers of maintenance   |
|--|
| the property settlement  |
| the parties' respective incomes and ability to earn income   |
| other:   |
| The Court has reviewed this agreement and finds it to be fair and equitable under all of the   |
| circumstances, and supported by sufficient consideration including the parties' mutual   |
| waivers, incomes per year and the property division. Full disclosure of each party's   |
| financial circumstances has occurred.  |
| b. Maintenance is reserved because:  |
| Either party can ask the court to order the payment of spousal maintenance in the future by filing a Motion stating a change in circumstances.   |
| □ c.       □ Petitioner       □ Respondent shall pay permanent spousal maintenance to the other party in the amount of \$ per month starting on (date): Any past due amounts are still owed.   |
| ☐ d. ☐ Petitioner ☐ Respondent shall pay temporary spousal maintenance to the other party in the amount of \$ per month starting on (date): and ending:  |
| Any past due amounts are still owed.   |
| The monthly amount of permanent or temporary spousal maintenance shall be:  subject to income withholding from the payor's income, regardless of source, by his or her employer, trustee, or other payor of funds and mailed to: Minnesota Child Support Payment Center, P.O. Box 64326, St. Paul, MN 55164-0326. If the person paying |
| spousal support is self-employed, send payments to Minnesota Child Support Payment   |
| Center, P.O. Box 64306, St. Paul, MN 55164-0306. To start income withholding,  |
| Petitioner or Respondent must apply for income withholding at the Child Support  |
| Office in their county. Until income withholding starts, the person owing maintenance  |
| shall pay the amount directly to the spouse receiving it.  |

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| OR  Maintenance shall be paid directly by the spouse owing the maintenance to the  |   |                                       |  |       |
|--|---|---------------------------------------|--|-------|
|  |   |                                       |  | spous |
| Vehic  | eles  |                                       |  |       |
| Awarding the vehicles as follows and ordering the party receiving the vehicles to pay for any loans or insurance for such vehicle: |   |                                       |  |       |
|  | Year / Make / Model                           | Awarded to:                           |  |       |
|  |   |                                       |  |       |
|  |   |                                       |  |       |
|  |   |                                       |  |       |
|  |   |                                       |  |       |
| Mari   | tal Property                                  |                                       |  |       |
| The p  | arties' marital property, household goods, fu | urniture and furnishings are awarded: |  |       |
| <ul><li>□ a.</li></ul>   | As currently divided <b>OR</b>                |                                       |  |       |
| □ b.   | As follows (add pages if necessary):          |                                       |  |       |
|  | To Petitioner:                                |                                       |  |       |
|  |   |                                       |  |       |
|  |   |                                       |  |       |
|  | To Respondent:                                |                                       |  |       |
|  | To Respondent:                                |                                       |  |       |
|  | To Respondent:                                |                                       |  |       |
| Non-l  | To Respondent:  Marital Property              |                                       |  |       |
|  |   |                                       |  |       |
| The p  | Marital Property                              |                                       |  |       |

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| -  |   |                      |                    |  |
|--|---|----------------------|--------------------|--|
| To Respor  | ndent:  |                      |                    |  |
| Cash and Accounts  |   |                      |                    |  |
| n. Awarding the s  Institution                                       | Type of Account                                       | as follows:  Amount  | Awarded to         |  |
|  |   | \$                   |                    |  |
|  |   | \$                   |                    |  |
|  |   | \$                   |                    |  |
|  |   | \$                   |                    |  |
|  |   | \$                   |                    |  |
|  |   |                      |                    |  |
|  | any cash not included in                              | a. above to the part | y who currently ha |  |
| OR Awarding t  Business None OR                                      | any cash not included in the cash as follows:         | a. above to the part |                    |  |
| OR Awarding t  Business None OR Awarding the                         | he cash as follows: parties' <b>business</b> as follo | a. above to the part |                    |  |
| OR Awarding t  Business None OR Awarding the  Manufactured H None OR | he cash as follows: parties' <b>business</b> as follo | a. above to the part |                    |  |

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| Real Property None OR Awarding solely to Petitioner Respondent all right, title, and interest the parties in the real property located at:  Street address in the City of, County of  State of, which has the following legal description:  with the following mortgages and loans to be paid, after the divorce is final, by Petitioner Respondent:  1st Mortgage: Amount currently owed: \$ and name of lender:  2nd Mortgage: Amount currently owed: \$ and name of lender:  and subject to the following liens or other agreements:  A lien in favor of Petitioner Respondent in the amount of \$  Other request regarding the property: (describe the request fully) |  | The debt on the manufactured home owed to:         |
|---|--|--|
| □ None OR   □ Awarding solely to □ Petitioner □ Respondent all right, title, and interest the parties in the real property located at:   Street address □   |  | snail be paid by Petitioner Respo                  |
| □ Awarding solely to □ Petitioner □ Respondent all right, title, and interest the parties in the real property located at:   Street address □   | Real Property                              |  |
| the parties in the real property located at:  Street address  | None OR                                    |  |
| Street address  | ☐ Awarding solely to ☐ Petitic             | oner Respondent all right, title, and interest o   |
| in the City of  | the parties in the real property loc       | cated at:  |
| with the following mortgages and loans to be paid, after the divorce is final, by  Petitioner Respondent:  1st Mortgage: Amount currently owed: \$ and name of lender:  2nd Mortgage: Amount currently owed: \$ and name of lender:  and subject to the following liens or other agreements:  A lien in favor of Petitioner Respondent in the amount of \$  | Street address                             |  |
| with the following mortgages and loans to be paid, after the divorce is final, by  Petitioner Respondent:  1st Mortgage: Amount currently owed: \$and name of lender:  2nd Mortgage: Amount currently owed: \$and name of lender:  and subject to the following liens or other agreements:  A lien in favor of Petitioner Respondent in the amount of \$  | in the City of                             | , County of  |
| ☐ Petitioner       ☐ Respondent:         1st Mortgage: Amount currently owed: \$  | State of                                   | , which has the following legal description:       |
| ☐ Petitioner       ☐ Respondent:         1st Mortgage: Amount currently owed: \$  |  |  |
| 1st Mortgage: Amount currently owed: \$ and name of lender:   | with the following mortgages and           | l loans to be paid, after the divorce is final, by |
| 2 <sup>nd</sup> Mortgage: Amount currently owed: \$and name of lender: and subject to the following liens or other agreements:  \[ \text{A lien in favor of } \text{Petitioner}  \text{Respondent in the amount of \$\\ \end{array}   | Petitioner Responden                       | t:   |
| and subject to the following liens or other agreements:  A lien in favor of Petitioner Respondent in the amount of \$   | 1st Mortgage: Amount currently o           | owed: \$and name of lender:                        |
| and subject to the following liens or other agreements:  A lien in favor of Petitioner Respondent in the amount of \$   |  |  |
| A lien in favor of Petitioner Respondent in the amount of \$  | 2 <sup>nd</sup> Mortgage: Amount currently | owed: \$and name of lender:                        |
| A lien in favor of Petitioner Respondent in the amount of \$  | _  |  |
|   | and subject to the following liens         | or other agreements:                               |
| Other request regarding the property: (describe the request fully)  | A lien in favor of Petitione               | er Respondent in the amount of \$                  |
|   | Other request regarding the p              | roperty: (describe the request fully)              |
|   |  |  |
|   |  |  |
|   |  |  |
|   |  |  |
|   |  |  |

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# 11. **Additional Real Property** None OR Awarding solely to Petitioner Respondent all right, title, and interest of the parties in the real property located at: Street address \_\_\_\_\_ in the City of \_\_\_\_\_\_, County of \_\_\_\_\_ State of \_\_\_\_\_\_, which has the following legal description: \_\_\_\_\_ with the following mortgages and loans to be paid, after the divorce is final, by Petitioner Respondent: 1<sup>st</sup> Mortgage: Amount currently owed: \$\_\_\_\_\_and name of lender:\_\_\_\_\_ 2<sup>nd</sup> Mortgage: Amount currently owed: \$\_\_\_\_\_\_ and name of lender:\_\_\_\_\_ and subject to the following liens or other agreements: A lien in favor of Petitioner Respondent in the amount of \$\_\_\_\_\_ Other request regarding the property: (describe the request fully) **12. Retirement Funds** a. Awarding Petitioner's pension, profit sharing, retirement plan, I.R.A., or 401(k) or other retirement fund as follows: Petitioner has no retirement funds OR 100% to Petitioner OR

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| Dividing Petitioner's retirement benefits fairly and equitably between the parties a follows: |  |  |  |   |
|---|--|--|--|---|
| b. Awarding Respondent's pension, profit sharing, retirement plan, I.R.A., or 401(k) of       |  |  |  |   |
| other retirement fund as follows:   |  |  |  |   |
| <ul><li>☐ Respondent has no retirement funds OR</li><li>☐ 100% to Respondent OR</li></ul>     |  |  |  |   |
|   |  |  |  | Dividing Respondent's retirement benefit follows: |
|   |  |  |  |   |
| from any responsibility for the debts above.  | s so divided. Include all debts listed at #. |  |  |   |
|   | To Be Paid By:                               |  |  |   |
| above.  |  |  |  |   |
| above.  | To Be Paid By:                               |  |  |   |
| above.  Debt Owed To:   |  |  |  |   |
| above.  Debt Owed To:   | To Be Paid By:                               |  |  |   |

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| Neither party is  | requesting a name chang   | 2.   |  |
|-------------------|---------------------------|------|--|
| OR                |                           |      |  |
| Changing Petition | ner's name to:            |      |  |
|                   |                           |      |  |
| First             | Middle                    | Last |  |
| Changing Respo    | ondent's name to:         |      |  |
|                   |                           |      |  |
| Changing Respo    | ondent's name to:  Middle | Last |  |
| First             |                           |      |  |
| First             | Middle                    |      |  |
| First             | Middle                    |      |  |
| First             | Middle                    |      |  |

- 16. Each party shall execute any and all documents necessary to transfer real and personal property as awarded herein without further order of the Court. Should either party fail to execute the necessary documents, a certified copy of the Judgment and Decree shall operate to transfer title as awarded.
- 17. Petitioner and Respondent agree that after a Judgment and Decree has been entered herein, Petitioner may have a third party, age 18 or older, serve the *Judgment and Decree* upon Respondent by mailing it to Respondent's last known address by first class mail, postage prepaid. The parties agree that service by mail instead of personal service shall constitute proper service of the *Judgment and Decree* for all purposes. Petitioner is responsible for filing an *Affidavit of Service* of the *Judgment and Decree* in the court file.

NOTICE: APPENDIX A SHALL BE INCORPORATED AND MADE A PART OF THE JUDGMENT AND DECREE. Appendix A contains provisions regarding Payments to Public Agency, Minnesota Statutes § 518A.50; Depriving Another of Custodial or Parental Rights--A

Felony, Minnesota Statutes § 609.26; Rules of Support, Maintenance, Parenting Time; Parental Rights from Minnesota Statutes § 518.17, subdivision 3; Wage and Income Deduction of Support and Maintenance, Minnesota Statutes § 518A.53; Change of Address or Residence; Cost of Living Increase of Support and Maintenance pursuant to Minnesota Statutes § 518A.75; Judgments for Unpaid Support pursuant to Minnesota Statutes § 548.091; Judgments for Unpaid Maintenance pursuant to Minnesota Statutes § 548.091; Medical Insurance and Expenses pursuant to Minnesota Statutes § 518A.41; and Minnesota Statutes § 259.115 regarding criminal penalties for failure to comply with felon name change law.

#### ACKNOWLEDGEMENT

The undersigned parties affirm to the Court that the foregoing *Conclusions of Law* incorporate the parties' complete and full agreement for marital termination to resolve all issues in this dissolution case, and upon approval and entry by the court, shall constitute the judgment and decree for marriage dissolution for all purposes. Furthermore, the parties assert that the facts stated in the *Findings of Fact* are true and accurate, that each party has fully disclosed the nature and extent of his or her property, debts, and income, and that this agreement is based upon that full and fair disclosure. The parties ask the Court to enter judgment in strict conformity with the foregoing and, so long as the Court does so, the parties agree that this matter may proceed as by default. If the Court intends to deviate at all from the terms of the foregoing, each party shall be notified and given the opportunity to present all arguments concerning all issues in the dissolution case.

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| STATE OF MINNESOTA )                              | STATE OF MINNESOTA )                              |
|---|---|
| ) SS  | ) SS  |
| COUNTY OF   | COUNTY OF   |
| (County where document is signed)                 | (County where document is signed)                 |
| DATED:  | DATED:  |
|   | · · · · · · · · · · · · · · · · · · ·             |
|   |   |
| Signature of Petitioner                           | Signature of Respondent                           |
| (Do NOT sign unless in presence of Notary Public) | (Do NOT sign unless in presence of Notary Public) |
| Subscribed and sworn to before me this            | Subscribed and sworn to before me this            |
| day of,   | day of ,  |
| Notary Public/Deputy Court Administrator          | Notary Public/Deputy Court Administrator          |
| •   | • • •   |
| Petitioner  | Respondent  |
| is not represented by an attorney                 | is not represented by an attorney                 |
| (Sign Petitioner's Waiver of Counsel)             | (Sign Respondent's Waiver of Counsel)             |
| is represented by the following attorney:         | is represented by the following attorney:         |
| Attorney's Name:                                  | Attorney's Name:                                  |
| Attorney's ID #:                                  | Attorney's ID #:                                  |
| Telephone: ()                                     | Telephone: ()                                     |
| Attorney's Address                                | Attorney's Address                                |
|   |   |
| City, State, Zip                                  | City, State, Zip                                  |
| E-mail address                                    | E-mail address                                    |
| Ву  | Ву  |
| Attorney for Petitioner                           | Attorney for Respondent                           |
| ODDED FOR   | HIDOMENIE   |
| ORDER FOR J<br>LET JUDGMENT BE ENT                |   |
| The foregoing facts were found by me after due    | BY THE COURT                                      |
| hearing and the Order thereon is recommended.     |   |
|   |   |
| District Court Referee                            | Judge of District Court                           |
| Dated:  | Dated:  |
|   |   |

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## **JUDGMENT**

| recitify the above c    | Conclusions of Law are the Judgment of the Court and Judgment is hereby entered. |
|-------------------------|--|
|                         | Court Administrator  |
| Dated:                  | Deputy   |
|                         | PETITIONER'S WAIVER OF COUNSEL   |
| I,                      | , know I have the right to be represented by                                     |
| a lawyer of my choic    | e. I hereby expressly waive that right and I freely and voluntarily sign the     |
| foregoing stipulation   | to terminate my marriage and resolve all issues in this marriage dissolution     |
| case. I understand th   | at an attorney would be helpful in determining the issues contained in the       |
| foregoing stipulation;  | however, I specifically decline to retain independent counsel.                   |
| Date                    | Signature of Petitioner  |
|                         | RESPONDENT'S WAIVER OF COUNSEL   |
| I,                      | declare as follows:  |
| 1. I know               | I have the right to be represented by an attorney of my choice. I hereby         |
| expressly waive that    | right and I freely and voluntarily sign the foregoing stipulation to terminate   |
| my marriage and reso    | lve all issues in this marriage dissolution case.                                |
| 2. I unde               | rstand that an attorney would be helpful in determining issues contained in      |
| the foregoing stipulat  | ion; however, I specifically decline to retain independent counsel.              |
| 3. I herel              | by expressly waive any right to contest the agreements set forth in the          |
| foregoing stipulation   | and I waive the thirty (30) days period to answer.                               |
| 4. My spe               | ouse may proceed to judgment pursuant to the terms of said stipulation as if     |
| by default, and without | ut further notice to me.   |
| Date                    | Signature of Respondent  |

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